STATE OF VERMONT

HUMAN SERVICES BOARD

In re)	Fair	Hearing	No.	19,240
)				
Appeal of)				

INTRODUCTION

The petitioner appeals a decision of the Department of Children and Families Economic Services (DCF) terminating his transitional Medicaid due to his failure to file a quarterly report.

FINDINGS OF FACT

- 1. The petitioner, his wife and two minor daughters received transitional Medicaid following their termination from Reach Up in October of 2003 due to an increase in income from employment. The family was required to file a quarterly report form containing their income as a condition to keeping their Medicaid.
- 2. The petitioner received a quarterly report form from PATH (DCF's predecessor) in December of 2003 which was due by January 8, 2004. The petitioner returned the form on December 31, 2003, more than a week ahead of time.
- 3. DCF says that it mailed the petitioner a computergenerated quarterly report form in March of 2004. The

petitioner says he did not receive the quarterly report form and his statement is found to be credible. He did, however, receive a subsequent letter mailed by PATH on April 8, 2004 saying that his form was due by April 8th and "if you do not return your form by April 19, 2004, you will no longer be eligible for transitional Medicaid."

- 4. The petitioner read this notice and interpreted it as meaning that he would get a quarterly report form within these timelines. It did not occur to him that the notice was implying that the quarterly report form had already been sent. The deadline came and went and the petitioner was still waiting for the report form.
- 5. On May 3, 2004, DCF sent the petitioner a notice that his children had been changed from Medicaid to the Dr. Dynasaur program and that he and his wife would be cut off from Medicaid on June 30, 2004 due to their failure to file a quarterly report form. The notice said that his family was scheduled for review in June of 2004 and that he would receive a new application for transitional Medicaid or VHAP at that time.
- 6. The petitioner realized when he got that letter that something had gone wrong and immediately contacted his worker to see what could be done. The worker told him that he needed

to file a new application and he did so on May 11, 2004. As part of that application he provided verification of his income.

- 7. On June 3, 2004, DCF sent the petitioner a notice that the family would continue on Medicaid until November 30, 2004 at which time the eligibility would be reviewed again. However, the worker who conducted the review later realized that the family had been terminated for failure to file their quarterly report form (this termination had originally come from a computerized system at the central office) and the petitioner was told that his Medicaid would actually end in June as originally noted for refusal to cooperate. The petitioner was told that since the program he was on is a "transitional" one giving the family a thirty-six month "health bridge" from Reach Up to independence after they started working, the petitioner could not be found eligible for that program again once he had been terminated because he no longer had a link to the Reach Up program. The petitioner appealed that decision at once.
- 8. It is found that the petitioner did not receive the quarterly report form from DCF/PATH in a timely manner and took action immediately to provide information to DCF/PATH as soon as he realized that he had not received the form and was

considered delinquent by DCF/PATH. The petitioner appears to have provided the necessary information more than six weeks in advance of the scheduled termination date of his Medicaid benefits. There was no indication from DCF/PATH that it felt the petitioner had acted in bad faith or that his failure to supply information was anything other than a mistake.

ORDER

The decision of DCF is reversed.

REASONS

DCF has the right to ask for verification of income in its Medicaid program. M126. The regulations state that recipients who are undergoing reviews must be sent necessary forms and directions far enough ahead for DCF to complete the review within the time limit. M131. Under these regulations, a recipient who "refuses" to give necessary proofs to DCF and who "fails to do his part" within time limits "may" have his coverage ended.

The facts here indicate that the petitioner at no time refused to give pertinent information to DCF. As soon as he discovered that he had not received the appropriate form, he took immediate steps to cooperate with DCF. He provided information to DCF which permitted it to make a decision on

his eligibility by June 3, 2004, more than three weeks before his transitional Medicaid was due to end. The decision on the merits was that he was still eligible but was disqualified for his failure to meet the original April 19, 2004 deadline. That decision was incorrect under the above regulation both because there was no deliberate failure to cooperate (a position which DCF never took during the hearing) and because the eligibility review was completed far in advance of the end of the eligibility period. DCF's decision places pure form over substance at the expense of a needy family. The decision is not in accord with DCF's own regulations and is reversed.

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